Membership Application I/We want to celebrate a special person or occasion through a donation. Name:_____ The amount of my donation is \$_____ Address: _____ This donation honors City: _____ State: _____Zip: _____ A birthday An anniversary Daytime Phone: _____ The birth of a child Evening Phone: _____ A retirement The memory of _____ E-mail Address: Other Additional Family Members residing at same address: Send a gift announcement to Name: ____ Address: City: _____ **Business URL:** (Business Memberships Only) State: _____ Zip: _____ Message to recipient: Select Level of Support below **Annual Membership Dues:** Individual/Family \$10.00 **Business \$25.00** Membership dues and honoree aifts can One Time Membership Dues: be paid by cash, check or credit card. Lifetime Individual/Family \$100.00 Lifetime Business \$500.00 Please make checks payable to FOTCPL. I would like to volunteer my time: Either mail or bring membership dues and ☐ Special Events application form to: ☐ Helping at the library Friends of The Colony Public Library ☐ Serving on the Friends Board 6800 Main Street ☐ Membership recruitment The Colony, TX 75056-1133 □ Newsletter/mailings ☐ I can volunteer wherever needed Credit card payment is available at the Library or at our web site (thecolonypl.org) on the Friends' page through the Friends' PayPal account.